

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional)  
**CSC 1-800-858-5294**

B. E-MAIL CONTACT AT SUBMITTER (optional)  
**SPRFiling@cscglobal.com**

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

2763 02332  
 CSC  
 801 Adlai Stevenson Drive  
 Springfield, IL 62703

Filed In: Iowa  
 (Delaware)

**SEE BELOW FOR SECURED PARTY CONTACT INFORMATION**

Recorded: 2/20/2024 at 8:11:17.0 AM  
 County Recording Fee: \$22.00  
 Iowa E-Filing Fee: \$3.00  
 Combined Fee: \$25.00  
 Revenue Tax: \$0.00  
 Delaware County, Iowa  
 Daneen Schindler RECORDER  
 BK: 2024 PG: 374

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME

OR

1b. INDIVIDUAL'S SURNAME <b>MESSER</b>	FIRST PERSONAL NAME <b>JAN</b>	ADDITIONAL NAME(S)/INITIAL(S) <b>K</b>	SUFFIX
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1c. MAILING ADDRESS <b>125 EVANS AVENUE</b>	CITY <b>MANCHESTER</b>	STATE <b>IA</b>	POSTAL CODE <b>52057</b>	COUNTRY <b>USA</b>
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2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME

OR

2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME **Fifth Third Bank, N.A.**

OR

3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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3c. MAILING ADDRESS <b>Fifth Third Bank Dividend, 38 Fountain Sq Plaza, 1MOBA55</b>	CITY <b>Cincinnati</b>	STATE <b>OH</b>	POSTAL CODE <b>45263</b>	COUNTRY <b>USA</b>
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4. COLLATERAL: This financing statement covers the following collateral:  
 The collateral described below is located at the Debtors address listed above. ALL OF THE DEBTORS RIGHT TITLE AND INTEREST IN PHOTOVOLTAIC SOLAR ENERGY EQUIPMENT (IF ANY) INCLUDING BUT NOT LIMITED TO ROOFTOP SOLAR PANELS ELECTRICAL INVERTERS CABLES AND WIRES SUPPORT BRACKETS RELATED EQUIPMENT MONITORING EQUIPMENT SMART METERS AND ADDITIONS OR REPLACEMENTS OF THE SAME. IN ADDITION THE SECURITY INTEREST INCLUDES ALL WARRANTIES ISSUED WITH RESPECT TO THE REFERENCED COLLATERAL ANY RENEWABLE ENERGY OR CARBON CERTIFICATES OR CREDITS (REFERRED TO AMONG OTHER THINGS AS SRECS) ANY RENEWABLE ENERGY PRODUCTION INCENTIVES (PERFORMANCE-BASED INCENTIVES) AND ANY OTHER ECONOMIC BENEFITS RELATED TO INCENTIVES TO SUPPORT RENEWABLE ENERGY PRODUCTION THAT BORROWER MAY RECEIVE OR BE ENTITLED TO AS A RESULT OF THE PHOTOVOLTAIC SOLAR ENERGY EQUIPMENT. THIS SECURITY AGREEMENT DOES NOT CREATE A SECURITY INTEREST IN THE DEBTORS REAL PROPERTY TO BE RECORDED IN THE LAND RECORDS.

5. Check only if applicable and check only one box: Collateral is  held in a Trust (see UCC1Ad, item 17 and Instructions)  being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:  Public-Finance Transaction  Manufactured-Home Transaction  A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:  Agricultural Lien  Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable):  Lessee/Lessor  Consignee/Consignor  Seller/Buyer  Bailee/Bailor  Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

2763 02332

**UCC FINANCING STATEMENT ADDENDUM**  
 FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here

9a. ORGANIZATION'S NAME	
OR	
9b. INDIVIDUAL'S SURNAME	
MESSER	
FIRST PERSONAL NAME	
JAN	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
K	

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10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME				
OR				
10b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
10c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

11.  ADDITIONAL SECURED PARTY'S NAME *or*  ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME				
OR				
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

13.  This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT:  
 covers timber to be cut     covers as-extracted collateral     is filed as a fixture filing

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):  
**JAN MESSER, 125 EVANS AVENUE,  
 MANCHESTER, IA 52057**

16. Description of real estate:  
**THE FOLLOWING DESCRIBED REAL ESTATE IN DELAWARE COUNTY, IOWA:**  
  
**THE EAST THIRTY NINE (39.0) FEET OF LOT SEVEN (7) AND THE WEST FIFTY ONE (51.0) FEET OF LOT EIGHT (8), BLOCK FOUR (4), GALES SUBDIVISION, MANCHESTER, IOWA, ACCORDING TO RESURVEY OF LOTS 1 THROUGH 11, BLOCK 4 & EAST 2' LOT 11, BLOCK 7, GALES SUBDIVISION, MANCHESTER, IOWA, RECORDED IN BOOK 2 PLATS, PAGE**

17. MISCELLANEOUS:

**UCC FINANCING STATEMENT ADDENDUM**  
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12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

<p>13. <input checked="" type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)</p> <p>15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):</p>	<p>14. This FINANCING STATEMENT:</p> <p><input type="checkbox"/> covers timber to be cut    <input type="checkbox"/> covers as-extracted collateral    <input checked="" type="checkbox"/> is filed as a fixture filing</p> <p>16. Description of real estate:</p> <p><b>153 AND</b>  <b>LOT 12 AND THE 20' ROAD EASEMENT ALONG THE WEST EDGE OF LOT 12 ON A PLAT OF HARTWICK LAKE CLUB NORTH, SECOND SUBDIVISION, A SUBDIVISION OF PART OF THE SOUTHEAST QUARTER (SE) OF THE SOUTHEAST QUARTER (SE) AND OF THE NORTHEAST QUARTER (NE) OF THE SOUTHEAST QUARTER (SE), EXCEPT THE NORTH 10 ACRES THEREOF, ALL IN SECTION TWENTY-FOUR (24) TOWNSHIP EIGHTY-EIGHT (88) NORTH, RANGE FIVE (5),</b></p>
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<p>15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):</p>	<p>16. Description of real estate:          WEST OF THE FIFTH P.M., ACCORDING TO PLAT RECORDED IN PLAT BOOK 5, PAGE 81, OFFICE OF DELAWARE COUNTY IOWA RECORDER, SAID REAL ESTATE IS HOWEVER STILL 1 SUBJECT TO USE AS A 20' UTILITY EASEMENT, AND SUBJECT TO PROTECTIVE COVENANTS AND RESTRICTIONS RECORDED IN BOOK X, MISC. PAGE 17 AND BOOK X, MISC. PAGE 18, IN SAID OFFICE.           PIN 630292103700</p>

17. MISCELLANEOUS: